FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1		INIZATION instructions)	Office use only				
NAME OF COMMITTEE (in	(Check if no is changed)		12FE4M5				
∣ , Tom DeLay Co	pngressional Committee						
ADDRESS (number and	street) 1606 Brooksto	one Lane					
X (Check if addr is changed)	ess Sugar Land		TX				
COMMITTEE E MA	II ADDDECC	CITY▲	STATE▲ ZIP CODE ▲				
COMMITTEE'S E-MA							
		1111111					
COMMITTEE'S WEB	PAGE ADDRESS (URL)		·				
tomdelay.con	n 	1111111111					
COMMITTEE'S FAX N 775-659-2036	NUMBER						
2. DATE <b>M 1</b>							
3. FEC IDENTIFICA	3. FEC IDENTIFICATION NUMBER C C00170860						
4. IS THIS STATEM	MENT NEW (N)	OR X AMENDED (A)					
I certify that I have exam	ined this Statement and to the best o	f my knowledge and belief it is true, corre	ct and complete				
Type or Print Name of	TreasurerTimothy S	cott					
Signature of Treasure	Electronically Filed by <b>Tim</b>	othy Scott	Date 01 / 02 / 2007				
NOTE: Submission of fa	·	ation may subject the person signing this	Statement to the penalties of 2 U.S.C. S437g. ED WITHIN 10 DAYS				
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FEOForm 1 (Revised 02/2003)

5.	TYPE OF COMMITTEE (Check One)											
	(a) X	X This committee is a principal campaign committee. (Complete the candidate information below.)										
	(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)										
	Name of Candidate Thomas Dale DeLay											
	Candidate Party Affiliatio	n REP		Office Sought:	X	House		Senate	Pro	esident	State District	TX 22
	(c)	This committee	e supports/c	opposes only o	ne cand	idate, and i	s NOT a	n authorized	d committee.			
	Name of Candidate											
	(d)	This committee	e is a			tional, State subordinate		ttee of the			(Democratic, Republican,etc.)	) Party.
	(e) This committee is a separate segregated fund											
	(f)	This committee committee.	supports/c	opposes more	than one	e Federal ca	andidate,	and is NOT	Γ a separate	segregated	fund or party	
6.	Name of Any	Connected Org	ganization	or Affiliated	Commit	tee						
L												
	Mailing Addre	ess										
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			<u> </u>					I		1		
					CITY	4	'		STATE A		ZIP CODE	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Relationship								<b>.</b>				
	Type of Connected Organization:											
			O:1.						Π	•		
Corporation				Corporation w/o Capital Stock			k	Labor Organization				
Membership Organization				Trade Association			Cooperative					

Page 2

Write or Type Comm	(Revised 02/2003)			Page <b>3</b>			
	ittee Name						
Tom DeLay C	ongressional Comm	iittee					
	cords: Identify by na Committee books and	ime, address, (phone numbe I records.	r optional), and positior	of the person in			
Full Name	Full Name Danielle DeLay Ferro						
Mailing Address		1606 Brookstone Lane					
		Sugar Land		77479_ <sub>_</sub> _			
Title or Position \	,	CITY A	STATE	ZIP CODE A			
	Campaign Manager		Telephone number	343 5844			
name and addiname Full Name of Treasurer Mailing Address	Timothy Scott	ss (phone number optional d agent (e.g., assistant treasi 1606 Brookstone Lane	urer).				
		Sugar Land	тх	77479 –			
		<del> </del>					
Title or Position \	•	CITY A	STATE A				
	Treasurer	-	STATE  ST	ZIP CODE A			
		-	28	ZIP CODE A			
Full Name of Designated	Treasurer	-	Telephone number	ZIP CODE A			
Full Name of Designated Agent	Treasurer	CITY A	Telephone number	ZIP CODE A			
Full Name of Designated Agent	Treasurer  Dana Benoit	CITY A  1411 Pecan Crossing De	Telephone number	ZIP CODE <b>A</b> 31 _ 343 _ 5844  77469 _			

	FEC Form 1 (Revi	ised 02/2003)	Page 4					
9.	Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds account safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.							
	Pr Mailing Address	rosperity Bank 14060 Southwest Frwy						
		Sugar Land TX	77478   _					
		CITY A STATE A	ZIP CODE 🛆					